Case 16-15066 Doc 1 Filed 05/03/16 Entered 05/03/16 09:03:44 Desc Main Document Page 1 of 75

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	1. Your full name			
	your pictu exar	e the name that is on government-issued are identification (for mple, your driver's	Leigh First name Ann	First name
	license or passport).		Middle name	Middle name
	iden	g your picture tification to your ting with the trustee.	Bowers Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ide your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security ber or federal vidual Taxpayer tification number	xxx-xx-0663	

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Case number (if known)

Debtor 1 Leigh Ann Bowers

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs. Business name(s)			
		Business name(s)				
		EINs	EINs			
5.	Where you live	339 N 1st Street, Apt 7	If Debtor 2 lives at a different address:			
		Wilmington, IL 60481 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Will County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Leigh Ann Bowers

ar	Tell the Court About	Your B	ankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required</i> page 1 and check the appropriate the second of the seco	d by 11 U.S.C. § 342(b) for Individuals Fili priate box.	ng for Bankruptcy
	choosing to file under	■ C	hapter 7				
		□с	hapter 11				
		□с	hapter 12				
		□с	hapter 13				
3.	How you will pay the fee		about how yo	ou may pay. Typ attorney is subr	ically, if you are paying the fe	check with the clerk's office in your local of the yourself, you may pay with cash, cashing behalf, your attorney may pay with a crec	er's check, or money
					tallments. If you choose this s (Official Form 103A).	option, sign and attach the Application for	r Individuals to Pay
☐ I request that my fee be waived (You may but is not required to, waive your fee, and m							
			applies to you	ur family size an	nd you are unable to pay the f	ee in installments). If you choose this opt Official Form 103B) and file it with your p	ion, you must fill out
9.	Have you filed for bankruptcy within the	■ No	Э.				
	last 8 years?	☐ Ye					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No)				
	cases pending or being filed by a spouse who is	□ Ye	es.				
	not filing this case with you, or by a business partner, or by an affiliate?						
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	□ No	o. Go to l	ine 12.			
	residence?	■ Ye	. Has yo	our landlord obta	ained an eviction judgment ag	ainst you and do you want to stay in your	residence?
		_ 16	ss.	No. Go to line	12.	,	
			_			tion Judgment Against You (Form 101A) a	and file it with this
			_	bankruptcy pet		,	

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Document Page 4 of 75 Case number (if known) Debtor 1 Leigh Ann Bowers Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 Leigh Ann Bowers

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Leigh Ann Bower	S			Case numbe	(if known)		
Par	t 6: Answer These Quest	ions for Re	porting Purposes					
16.	What kind of debts do you have?		Are your debts primarily individual primarily for a pe			ned in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.					
			■ Yes. Go to line 17.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.		25,001-50,000 50,001-100,000 50,001-100,000 More than100,000 1 - \$10 million 01 - \$50 million 01 - \$100 million 01 - \$500 million			
		16c.	State the type of debts you	u owe that are not consur	mer debts or busines	s debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapt	ter 7. Go to line 18.				
	Do you estimate that after any exempt	■ Yes.	I am filing under Chapter 7 are paid that funds will be	 Do you estimate that a available to distribute to 	fter any exempt propunsecured creditors?	erty is excluded and administrative expenses		
	administrative expenses		■ No					
	are paid that funds will be available for distribution to unsecured		□ Yes					
	creditors?							
18.	How many Creditors do	□ 1-49		1 ,000-5,000)	□ 25,001-50,000		
		50-99		5001-10,000	0	5 0,001-100,000		
		□ 100-19 □ 200-99		□ 10,001-25,0	000	☐ More than100,000		
19.	How much do you	\$ 0 - \$5	0,000	□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		1 - \$100,000					
			01 - \$500,000 01 - \$1 million					
20.	How much do you	□ \$0 - \$5		□ \$1,000,001				
	Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? How many Creditors do you estimate that you owe? How much do you estimate your assets to be worth? How much do you estimate your liabilities to be?		01 - \$100,000					
			01 - \$500,000 01 - \$1 million	_ ' ' '		_ + -// +		
Par	t 7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
						under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.		
			ney represents me and I di , I have obtained and read			t an attorney to help me fill out this		
		I request r	elief in accordance with the	e chapter of title 11, Unite	ed States Code, spec	cified in this petition.		
		bankruptc and 3571.	y case can result in fines u			r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Leigh Ar	Ann Bowers nn Bowers of Debtor 1		Signature of Debtor	r 2		
		Executed	on May 3, 2016		Executed on			
			MM / DD / YYYY			/ DD / YYYY		

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Debtor 1 Leigh Ann Bowers Document Page 7 of 75

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	naniam Chandraiah Attorney for Debtor	Date	May 3, 2016 MM / DD / YYYY
Subraman Printed name	iam Chandraiah		
Chicago B	ankruptcy Help / Chandraiah La	aw Firm	
La Grange	lington Ave , Suite 6B e, IL 60525-2225 City, State & ZIP Code		
Contact phone	3128963009	Email address	chicagobankruptcyhelp@gmail.com
237501 Bar number & Si	tate		

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		1700.11111	:III)	
Fill in this infor	mation to identify your	case:			
Debtor 1	Leigh Ann Bowe	rs			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is a
					amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	15,842.95
	1c. Copy line 63, Total of all property on Schedule A/B	\$	15,842.95
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	22,645.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	91,419.15
	Your total liabilities	\$	114,064.15
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,557.88
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,750.00
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	:hedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Leigh Ann Bowers

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8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,757.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	11,360.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	11,360.00

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		Document	Page 10 of 75		
Fill in this in	formation to identify your	case and this filing:			
Debtor 1	Leigh Ann Bowe	re			
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILI	LINOIS		
	, ,				
Case number			<u> </u>		☐ Check if this is an
					amended filing
Official F	Form 106A/B				
_		art.			
	ule A/B: Prop				12/15
think it fits bes information. If i Answer every o	t. Be as complete and accura more space is needed, attach juestion.	pe items. List an asset only once. I ate as possible. If two married peo a separate sheet to this form. On	ple are filing together, both a the top of any additional pag	re equally responsible for s	upplying correct
Part 1: Descr	ibe Each Residence, Building	g, Land, or Other Real Estate You (Own or Have an Interest In		
1. Do you own	or have any legal or equitabl	e interest in any residence, buildin	ng, land, or similar property?		
_					
No. Go to	Part 2.				
☐ Yes. Whe	ere is the property?				
Part 2: Descr	ibe Your Vehicles				
7 dit 21	ibo i oui voinoico				
	•	ele, also report it on Schedule G:	Executory Contracts and L	Inexpired Leases.	
2.4 Make	Jeep	Who has an interest in	the manager 2 of	Do not deduct secured of	claims or exemptions. Put
3.1 Make:	Patriot	Who has an interest in	the property? Check one	the amount of any secur	ed claims on Schedule D:
Model: Year:	2015	Debtor 1 only		Creditors who have Cla	ims Secured by Property.
		Debtor 2 only Joseph Debtor 1 and Debtor Debtor 1 and Debtor	2 only	Current value of the entire property?	Current value of the portion you own?
	nformation:	At least one of the de	•	ciiii o proporty :	po
condi Locat	, FWD, in very good tion. White color. ion: 339 N 135 Street, A	☐ Check if this is com		\$14,258.00	\$14,258.00
Kelly	mington IL 60481 Blue Book private part in very good condition 58.				
Examples: E ■ No		ATVs and other recreational ve onal watercraft, fishing vessels,			
☐ Yes					
		you own for all of your entries . Write that number here			\$14,258.00
	ibe Your Personal and Hous				_
Do you own	or have any legal or equit	able interest in any of the follo	wing itame?		Current value of the

bo you own or have any legal or equitable interest in any of the following iter

portion you own?

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Case number (if known) Document Debtor 1 Leigh Ann Bowers

Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Kitchen table and chairs. \$45.00 Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Dining room table and chairs. \$60.00 Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Living room sofa. \$100.00 Coffee & end tables. \$10.00 Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 \$20.00 Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 \$175.00 Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Beddina. \$15.00 Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... Vacuum cleaner. \$10.00 Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 \$25.00 Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Televisions (2) \$220.00 Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Microwave. \$10.00 Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Computer. \$60.00 Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Cell phone. \$100.00 Location: 339 N 1st Street, Apt 7, Wilmington IL 60481

Official Form 106A/B

Debtor	1 Leigh Ann E	Bowers	Document	Page 12 of 75 Case number	(if known)
		5011013			
Exar	other collect	d figurines; paintings, ions, memorabilia, co		oks, pictures, or other art objects; st	amp, coin, or baseball card collections;
■ No	o es. Describe				
Exar ■ N	musical instr	ographic, exercise, an	d other hobby equipment;	bicycles, pool tables, golf clubs, skis	s; canoes and kayaks; carpentry tools;
10. Fire	es. Describe				
	amples: Pistols, rifle	s, shotguns, ammunit	ion, and related equipmen	t	
☐ Ye	es. Describe				
11. Clot	amples: Everyday c	lothes, furs, leather co	oats, designer wear, shoes	accessories	
	es. Describe				
		accessories suc	l such as slacks, blou ch as gloves, belts, pu 1st Street, Apt 7, Wilr		\$250.00
■ Ye	es. Describe		nsive costume jewelry 1st Street, Apt 7, Wilr		\$60.00
Exa	a-farm animals amples: Dogs, cats, o es. Describe	birds, horses			
		Kitten Location: 339 N	1st Street, Apt 7, Wiln	nington IL 60481	\$300.00
□ N	-		you did not already list, i	ncluding any health aids you did	not list
			cook books, and kids 1st Street, Apt 7, Wilr		\$90.00
			s from Part 3, including a	ny entries for pages you have atta	\$1,550.00
	Describe Your Finar				
Do you	own or have any	legal or equitable int	erest in any of the follow	ing?	Current value of the portion you own? Do not deduct secured

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claims or exemptions.

Deb		Case 16-15		Doc 1	Filed 05/03/16 Document	Entered 05/0 Page 13 of 75	3/16 09:03:44 Case number (if known)	Desc Main
16.		Leigh Aim Do	11013					
_	<i>Example</i> I No				our home, in a safe dep		vhen you file your petiti	on
							Cash on hand Location: 339 N 1st Street, Apt 7, Wilmington IL 60481	\$17.00
	Example				al accounts; certificates counts with the same ins		edit unions, brokerage h	nouses, and other similar
	No Ves				Institution	name:		
	- 103		17.1.	Checking	ending ir	Area Credit Union on 0099. : 296 W Jeffery St, I	_	\$1.49
			17.2.	Savings	ending ir	Area Credit Union s n 0091. : 296 W Jeffery St, I		\$16.46
			vestme		rith brokerage firms, mo	ney market accounts		
	joint ver		k and i	nterests in ir	ncorporated and uninc	orporated businesses	s, including an interes	t in an LLC, partnership, and
	No Yes. G	iive specific infor		about them ne of entity:			% of ownership:	
_	Negotiak Non-neg	ole instruments in	clude pe	ersonal check	r negotiable and non-nass, cashiers' checks, pronot transfer to someone	missory notes, and mor	ney orders.	
	No Yes. Gi	ive specific inform		bout them er name:				
		ent or pension acts: Interests in IR.			1(k), 403(b), thrift savinç	gs accounts, or other pe	ension or profit-sharing	plans
	Yes. Lis	st each account s		ely. f account:	Institution	name:		
			Pensi	on	of Illionis Location System, Springfie Value is	s eligible for a pensi s upon retirement. : State Employees F 2101 S Veterans Pa eld, IL 62704 stated as unknown on years of service a	Retirement rkway, as that will	Unknown

Official Form 106A/B Schedule A/B: Property page 4

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Case number (if known) Document Debtor 1 Leigh Ann Bowers 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because

someone has died.

No

☐ Yes. Give specific information..

	Case 16-15066	Doc 1 Filed 05/0 Docume		05/03/16 09:03:44	Desc Main
Debte	Leigh Ann Bowers		ent Page 15	Case number (if known)	
	laims against third parties, wh			emand for payment	
	Examples: Accidents, employmer No	nt disputes, insurance claims,	or rights to sue		
	Yes. Describe each claim				
	ther contingent and unliquidat	ed claims of every nature, in	ncluding counterclain	ns of the debtor and rights to	set off claims
	No				
Ц	Yes. Describe each claim				
35. A	ny financial assets you did not	t already list			
	No				
	Yes. Give specific information				
26		aur antrica from Dart 4 inch	udina any antrica far	anno vou hove etteched	
	Add the dollar value of all of yo for Part 4. Write that number h				\$34.95
Part 5	Describe Any Business-Related	l Property You Own or Have an	Interest In. List any real	estate in Part 1.	
37 D c	you own or have any legal or equ	itable interest in any business-	elated property?		
	No. Go to Part 6.	,			
	es. Go to line 38.				
_					
	_				
Part 6	Describe Any Farm- and Comme If you own or have an interest in fa		You Own or Have an Inte	erest In.	
	•	·			
_	o you own or have any legal or	r equitable interest in any fa	rm- or commercial fis	shing-related property?	
_	No. Go to Part 7.				
	Yes. Go to line 47.				
Part 7	Describe All Property You	Own or Have an Interest in That	You Did Not List Above		
	o you have other property of a Examples: Season tickets, countr		list?		
_	No	y club membership			
_	Yes. Give specific information	*****			
					Γ
54.	Add the dollar value of all of yo	our entries from Part 7. Writ	e that number here		\$0.00
Part 8	List the Totals of Each Part	of this Form			
55.	Part 1: Total real estate, line 2				\$0.00
	Part 2: Total vehicles, line 5		\$14,258.0		
	Part 3: Total personal and hou	sehold items, line 15	\$1,550.0		
58.	Part 4: Total financial assets, l	ine 36	\$34.9		
59.	Part 5: Total business-related	property, line 45	\$0.0		
60.	Part 6: Total farm- and fishing-	-related property, line 52	\$0.0		
61.	Part 7: Total other property no	t listed, line 54	+ \$0.0	0_	

Official Form 106A/B Schedule A/B: Property page 6

\$15,842.95

Copy personal property total

62. **Total personal property.** Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$15,842.95

\$15,842.95

Case 16-15066 Doc 1 Filed 05/03/16 Entered 05/03/16 09:03:44 Desc Main

		17(7(1111))		
Fill in this infor	mation to identify your	case:		
Debtor 1	Leigh Ann Bower	'S		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	he Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Kitchen table and chairs. Location: 339 N 1st Street, Apt 7,	\$45.00		\$45.00	735 ILCS 5/12-1001(b)
Wilmington IL 60481 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Dining room table and chairs. Location: 339 N 1st Street, Apt 7,	\$60.00		\$60.00	735 ILCS 5/12-1001(b)
Wilmington IL 60481 Line from Schedule A/B: 6.2			100% of fair market value, up to any applicable statutory limit	
Living room sofa.	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Ellie Holli Geriedale PAD. G.G			100% of fair market value, up to any applicable statutory limit	
Coffee & end tables. Location: 339 N 1st Street, Apt 7,	\$10.00		\$10.00	735 ILCS 5/12-1001(b)
Wilmington IL 60481 Line from Schedule A/B: 6.4			100% of fair market value, up to any applicable statutory limit	
Lamps. Location: 339 N 1st Street, Apt 7,	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
Wilmington IL 60481 Line from Schedule A/B: 6.5			100% of fair market value, up to any applicable statutory limit	

Case 16-15066 Doc 1

De	Edit Leigh Aim Bowers			Case Hulliber (II KHOWII)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from			Specific laws that allow exemption
		Schedule A/B	00	ion only one box to out onemple	
	Beds (2) Location: 339 N 1st Street, Apt 7,	\$175.00	•	\$175.00	735 ILCS 5/12-1001(b)
	Wilmington IL 60481 Line from Schedule A/B: 6.6			100% of fair market value, up to any applicable statutory limit	
	Bedding. Location: 339 N 1st Street, Apt 7,	\$15.00		\$15.00	735 ILCS 5/12-1001(b)
	Wilmington IL 60481 Line from Schedule A/B: 6.7			100% of fair market value, up to any applicable statutory limit	
	Vacuum cleaner. Location: 339 N 1st Street, Apt 7,	\$10.00		\$10.00	735 ILCS 5/12-1001(b)
	Wilmington IL 60481 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	DVD player. Location: 339 N 1st Street, Apt 7,	\$25.00		\$25.00	735 ILCS 5/12-1001(b)
	Wilmington IL 60481 Line from <i>Schedule A/B</i> : 7.2			100% of fair market value, up to any applicable statutory limit	
	Televisions (2) Location: 339 N 1st Street, Apt 7,	\$220.00		\$220.00	735 ILCS 5/12-1001(b)
	Wilmington IL 60481 Line from Schedule A/B: 7.3			100% of fair market value, up to any applicable statutory limit	
	Microwave. Location: 339 N 1st Street, Apt 7,	\$10.00		\$10.00	735 ILCS 5/12-1001(b)
	Wilmington IL 60481 Line from Schedule A/B: 7.4			100% of fair market value, up to any applicable statutory limit	
	Computer.	\$60.00		\$60.00	735 ILCS 5/12-1001(b)
	Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Line from Schedule A/B: 7.5			100% of fair market value, up to any applicable statutory limit	
	Cell phone. Location: 339 N 1st Street, Apt 7,	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
	Wilmington IL 60481 Line from Schedule A/B: 7.6			100% of fair market value, up to any applicable statutory limit	
	Wearing apparel such as slacks, blouses, dresses, outerwear, and	\$250.00		\$250.00	735 ILCS 5/12-1001(a)
	accessories such as gloves, belts, purses, etc.			100% of fair market value, up to any applicable statutory limit	
	Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Line from Schedule A/B: 11.1				
	Various inexpensive costume jewelry	\$60.00		\$60.00	735 ILCS 5/12-1001(b)
	to go with outfits. Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
	Kitten Location: 339 N 1st Street, Apt 7,	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
	Wilmington IL 60481 Line from Schedule A/B: 13.1			100% of fair market value, up to any applicable statutory limit	

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Case number (if known)

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B			
	College books, cook books, and kids books.	\$90.00		\$90.00	735 ILCS 5/12-1001(b)
	Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Line from <i>Schedule A/B</i> : 14.1			100% of fair market value, up to any applicable statutory limit	
	Cash on hand Location: 339 N 1st Street, Apt 7,	\$17.00	■ \$17.00 735 IL		735 ILCS 5/12-1001(b)
	Wilmington IL 60481 Line from Schedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit	
	Checking: 2 Rivers Area Credit Union checking account ending in 0099.	\$1.49	■ \$1.4		735 ILCS 5/12-1001(b)
Lo Ka	Location: 296 W Jeffery St, Kankakee, IL 60901 Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Savings: 2 Rivers Area Credit Union savings account ending in 0091.	\$16.46		\$16.46	735 ILCS 5/12-1001(b)
	Location: 296 W Jeffery St, Kankakee, IL 60901 Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	Pension: Debtor is eligible for a pension from the State of Illionis	Unknown		100%	735 ILCS 5/12-704
	upon retirement. Location: State Employees Retirement System, 2101 S Veterans Parkway, Springfield, IL 62704 Value is stated as unknown as that will depend on years of service at time o Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3	3 years after that for ca	ases fi	,	,
	Yes. Did you acquire the property covered No	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	1 1 1 1 1 1 1 2 3				

	Case 16-15066	Document Page 19	0 of 75		
FIII	in this information to identify yo		7 (11 7.)		
Deb	otor 1 Leigh Ann Bow	vers			
	First Name	Middle Name Last Name			
	otor 2 buse if, filing) First Name	Middle Name Last Name			
Unii	ited States Bankruptcy Court for the	NORTHERN DISTRICT OF ILLINOIS			
	se number			☐ Check	if this is an
				amend	ded filing
Sc Se as	s complete and accurate as possible.	S Who Have Claims Secured If two married people are filing together, both are ed out, number the entries, and attach it to this form. O	qually responsible for su	pplying correct informa	
	ber (if known).	out, number the entries, and attach it to this form. O	in the top of any addition	iai pages, write your na	ille allu case
. Do	o any creditors have claims secured b	y your property?			
	$\hfill\square$ No. Check this box and submit	this form to the court with your other schedules. Y	ou have nothing else to	report on this form.	
	■ Yes. Fill in all of the information	below.			
Par	t 1: List All Secured Claims				
for e	each claim. If more than one creditor ha	more than one secured claim, list the creditor separately s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	<u> </u>	Describe the property that secures the claim:	\$22,645.00	\$14,258.00	\$8,387.00
	Creditor's Name	2015 Jeep Patriot 15,500 miles			
	PO Box 961275 Fort Worth, TX 76161-1275	White, FWD, in very good condition. White color. Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Kelly Blue Book private party value in very good condition is \$14,258. As of the date you file, the claim is: Check all that apply. Contingent			
	Fort Worth, TX	White, FWD, in very good condition. White color. Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Kelly Blue Book private party value in very good condition is \$14,258. As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			
Who	Fort Worth, TX 76161-1275	White, FWD, in very good condition. White color. Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Kelly Blue Book private party value in very good condition is \$14,258. As of the date you file, the claim is: Check all that apply. Contingent			
_	Fort Worth, TX 76161-1275 Number, Street, City, State & Zip Code	White, FWD, in very good condition. White color. Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Kelly Blue Book private party value in very good condition is \$14,258. As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	cured		
= [Fort Worth, TX 76161-1275 Number, Street, City, State & Zip Code o owes the debt? Check one.	White, FWD, in very good condition. White color. Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Kelly Blue Book private party value in very good condition is \$14,258. As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.	cured		
	Fort Worth, TX 76161-1275 Number, Street, City, State & Zip Code o owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	White, FWD, in very good condition. White color. Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Kelly Blue Book private party value in very good condition is \$14,258. As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan) Statutory lien (such as tax lien, mechanic's lien)	cured		
	Fort Worth, TX 76161-1275 Number, Street, City, State & Zip Code o owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	White, FWD, in very good condition. White color. Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Kelly Blue Book private party value in very good condition is \$14,258. As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit	cured		
	Fort Worth, TX 76161-1275 Number, Street, City, State & Zip Code o owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	White, FWD, in very good condition. White color. Location: 339 N 1st Street, Apt 7, Wilmington IL 60481 Kelly Blue Book private party value in very good condition is \$14,258. As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan) Statutory lien (such as tax lien, mechanic's lien)	cured		

Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$22,645.00 \$22,645.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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			Γ	Ocument	Page 2	0 of 75		
Fill in	this inform	nation to identify your o	case:					
Debto	or 1	Leigh Ann Bower	s					
		First Name	Middle Nar	me	Last Name			
Debto		First Name	NAC-L-III- NI		Last Name			
(Spous	e if, filing)	First Name	Middle Nar	me	Last Name			
Unite	d States Bar	kruptcy Court for the:	NORTHERN	DISTRICT OF IL	LINOIS			
Case	number							
(if know								Check if this is an
								amended filing
٠	.:	4005/5						
		<u>106E/F</u>	U I I		01-:			40/45
		/F: Creditors W						12/15 aims. List the other party to
ichedi ichedi eft. Att	ule G: Execut ule D: Credito tach the Cont and case num	ory Contracts and Unexp ors Who Have Claims Sect inuation Page to this pag aber (if known).	ired Leases (Off ured by Property e. If you have no	icial Form 106G). I y. If more space is o information to re	Do not include needed, copy	contracts on Schedule A/B: any creditors with partially the Part you need, fill it out, do not file that Part. On the	secured clain , number the e	ns that are listed in entries in the boxes on the
Part 1		of Your PRIORITY Un						
	•	rs have priority unsecured	d claims against	t you?				
	No. Go to Pa	art 2.						
	Yes.							
Part 2		of Your NONPRIORIT						
	_	rs have nonpriority unsec	_	•				
	No. You hav	e nothing to report in this pa	art. Submit this fo	orm to the court with	your other sche	edules.		
	Yes.							
ur th	nsecured claim	n, list the creditor separately	/ for each claim. I	For each claim listed	d, identify what t	o holds each claim. If a creditype of claim it is. Do not list on three nonpriority unsecured	laims already i	ncluded in Part 1. If more
								Total claim
4.1	Adams	Family Dentistry	1	Last 4 digits of acc	ount number	0072		\$2,880.00
		Creditor's Name		M/l 4b	· ! 10	4/204 <i>E</i>		
	5600 W Burbank	87th St K. IL 60459		When was the deb	t incurrea?	1/2015		_
		reet City State Zlp Code		As of the date you	file, the claim	is: Check all that apply		
	Who incur	red the debt? Check one.						
	Debtor	1 only		☐ Contingent				
	☐ Debtor	2 only	I	☐ Unliquidated				
	☐ Debtor	1 and Debtor 2 only	I	☐ Disputed				
	☐ At least	one of the debtors and and	other	Type of NONPRIOR	RITY unsecure	d claim:		
		if this claim is for a comm	nunity	Student loans				
	debt	n subject to offset?				aration agreement or divorce t	that you did not	t
	No	ii aubject to oliset?		report as priority clai		ng plans, and other similar del	nte	
				-	•	ig pians, and other similal det	Jio	
	☐ Yes			Other. Specify	8/2015			_

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Leign Ann Bowers		Case number (if know)	
Advanced Collection Bu Nonpriority Creditor's Name	Last 4 digits of account number		\$687.00
Po Box 560063	When was the debt incurred?	Opened 11/01/12	
Rockledge, FL 32956 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	7.0 0 uuto y ou, o.u	or onook an that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
☐Yes	Other. Specify Collection	Attorney Health First Inc	
Ally Financial	Last 4 digits of account number	8161	\$14,059.00
Nonpriority Creditor's Name		Opened 6/01/10 Last Active	
200 Renaissance Ctr Detroit, MI 48243	When was the debt incurred?	7/29/13	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
		e. (Repossessed years ago so	
Yes	Other. Specify this is unse	ecured loan now.)	
Arnold Scott Harris /Cir Ct Kankake	Last 4 digits of account number	4691	\$169.00
Nonpriority Creditor's Name 111 W Jackson Blvd, Ste 600 Chicago, IL 60604	When was the debt incurred?	2/26/2016	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
□ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify County	for Circuit Court of Kankakee	

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Leign Ann Bowers	Case number (if know)	
Badcock & More	Last 4 digits of account number 3108	\$1,569.00
Nonpriority Creditor's Name 2051 N Harbor City B	When was the debt incurred? 4/11/2012	
Melbourne, FL 32935 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The state year may are stated to chook all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did report as priority claims	d not
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify furniture	
Bay Area Credit Service / AT&T		
Mbty	Last 4 digits of account number 6436	\$692.08
Nonpriority Creditor's Name PO Box 467600 Atlanta, GA 31146	When was the debt incurred? 11/2014	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did report as priority claims	d not
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	_ Collection for AT&T Mobility	
Yes	Other. Specify Telecommunications services.	
Bevard Health Alliance	Last 4 digits of account number 0765	\$30.00
Nonpriority Creditor's Name PO box 1137	When was the debt incurred? 3/7/2012 to 4/10/2012	
Melbourne, FL 32902 Number Street City State Zlp Code	As of the date you file the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you di	d not
Is the claim subject to offset?	report as priority claims	· · · · ·
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify medical	

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Leigh Ann Bowers Case number (if know)

DCDI	Leigh Aim Bowers	Odsc Humber (ii know)	
4.8	Blatt Hasenmiller Leibsker & Moore	Last 4 digits of account number 9008	\$3,420.44
	Nonpriority Creditor's Name 10 S LaSalle St, Suite 2200	When was the debt incurred? 6/2015	
	Chicago, IL 60603 Number Street City State Zlp Code	As of the date you file the claim is: Cheek all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Collection for Midland Funding, Citibank, Mastercard	
4.9	Cach Llc	Last 4 digits of account number 7956	\$473.00
	Nonpriority Creditor's Name 4340 S Monaco, Second Floor	When was the debt incurred?	
	Denver, CO 80237		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Fifth Third Bank	
4.1 0	Cach Lic	Last 4 digits of account number 2752	\$455.00
	Nonpriority Creditor's Name 4340 S Monaco, Second Floor Denver, CO 80237	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	■ Other. Specify Fifth Third Bank	

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Case number (if know)

DCDIO	Leigh Ann Bowers		Case Harriber (II know)	
4.1	Cap1/carsn	Last 4 digits of account number	4160	\$0.00
	Nonpriority Creditor's Name 26525 N Riverwoods Blvd Mettawa, IL 60045	When was the debt incurred?	Opened 3/01/10 Last Active 3/17/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.1	Channahon Fire Protection District Nonpriority Creditor's Name	Last 4 digits of account number	0686	\$1,438.00
	PO box 457	When was the debt incurred?	7/10/2013	
	Wheeling, IL 60090	A = -f th = d=t= file the = l=i== :	Charle all that and to	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан тлат арріу	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify medical / tr run # 13-27	ansport 1865	
4.1	City of Titusville Nonpriority Creditor's Name	Last 4 digits of account number	8924	\$409.82
	PO Box 2807 Titusville, FL 32781-2807	When was the debt incurred?	8/27/2012	
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify utility (water	er/sewer/waste)	

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Case number (if know) Debtor 1 Leigh Ann Bowers 4.1 Clinical Assoc in Medicine LLC e001 \$511.20 Last 4 digits of account number 4 Nonpriority Creditor's Name 330 N Madison St, Ste 202 When was the debt incurred? 12/10/2013 though 7/28/2014 Joliet, IL 60435 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify medical Cmre / Brevard Emergency 4.1 9106 \$343.00 **Services** Last 4 digits of account number Nonpriority Creditor's Name 3075 E Imperial Hwy Ste When was the debt incurred? Opened 3/01/12 Brea, CA 92821 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Brevard Emergency ☐ Yes Other. Specify Services Pa 4.1 6 Comcast 3510 \$252.37 Last 4 digits of account number Nonpriority Creditor's Name PO Box 3002 When was the debt incurred? 3/3/2012 Southeastern, PA 19398-3002 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify cable tv services

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Case number (if know)

Debt	Leign Ann Bowers		Case number (if know)	
4.1 7	Comed	Last 4 digits of account number	2225	\$1,319.73
	Nonpriority Creditor's Name PO Box 6111	When was the debt incurred?	6/2015 to 4/27/2016	
	Wilmington, IL 60481-1182 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify utility		
4.1 8	Convergent Outsourcing	Last 4 digits of account number	9394	\$81.00
	Nonpriority Creditor's Name 800 Sw 39th Street Renton, WA 98057	When was the debt incurred?	Opened 7/01/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Company	Attorney Florida Power Light	
4.1 9	Dept Of Education/neln	Last 4 digits of account number	4865	\$3,053.00
	Nonpriority Creditor's Name		Opened 11/01/14 Last Active	
	3015 Parker Rd Aurora, CO 80014	When was the debt incurred?	3/31/16	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans	u Gann.	
	☐ Check if this claim is for a community debt	_	and the state of t	
	Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	Other, Specify		

Educational

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Case number (if know)

Debto	Leigh Ann Bowers		Case number (if know)	
4.2	Dept Of Education/neln Nonpriority Creditor's Name	Last 4 digits of account number	2765	\$1,835.00
	3015 Parker Rd Aurora, CO 80014	When was the debt incurred?	Opened 4/01/14 Last Active 3/31/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		
	■ No			
	Yes	Other. Specify	<u> </u>	
$\overline{}$		Luucationa		
4.2 1	Dept Of Education/neln Nonpriority Creditor's Name	Last 4 digits of account number	2665	\$1,783.00
	3015 Parker Rd Aurora, CO 80014	When was the debt incurred?	Opened 4/01/14 Last Active 3/31/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	☐ Yes	Other. Specify		
		Educationa		
4.2	Dept Of Education/neln Nonpriority Creditor's Name	Last 4 digits of account number	6874	\$1,779.00
	3015 Parker Rd Aurora, CO 80014	When was the debt incurred?	Opened 2/01/13 Last Active 3/31/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	■ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	ni e	

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Leigh Ann Bowers Case number (if know)

DCDI	Leigh Aim Bowers			
4.2 3	Dept Of Education/neln	Last 4 digits of account number	4765	\$1,750.00
	Nonpriority Creditor's Name 3015 Parker Rd Aurora, CO 80014	When was the debt incurred?	Opened 11/01/14 Last Active 3/31/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ■ Student loans	d claim:	
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	l	
4.2 4	Dept Of Education/neln Nonpriority Creditor's Name	Last 4 digits of account number	6974	\$1,160.00
	3015 Parker Rd Aurora, CO 80014	When was the debt incurred?	Opened 2/01/13 Last Active 3/31/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	■ Student loans □ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	ıl	
4.2 5	Direct Auto Insurance Co	Last 4 digits of account number	9495	\$57.42
	Nonpriority Creditor's Name PO Box 969 Westbrook, CT 06498	When was the debt incurred?	5/4/2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
			= -	
	Yes	Other. Specify auto premi	um	

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Debtor 1 Leigh Ann Bowers Case number (if know) 4.2 **Diversified Adjustment / Sprint** 1338 \$119.45 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 32145 When was the debt incurred? 12/2014 Minneapolis, MN 55432-0145 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection for Sprint ☐ Yes Other. Specify Telecommunications services. 4.2 \$296.00 **Dsnb Macys** 4030 Last 4 digits of account number Nonpriority Creditor's Name Opened 5/01/10 Last Active Po Box 8218 When was the debt incurred? 12/01/12 Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.2 Enhanced Recovery Co L 1465 \$692.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Po Box 57547 When was the debt incurred? Opened 11/01/15 Jacksonville, FL 32241 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney At T ☐ Yes

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Case number (if know)

Debto	Leigh Ann Bowers	——————————————————————————————————————	Case number (if know)	
4.2	Fifth Third Bank Nonpriority Creditor's Name	Last 4 digits of account number	2290	\$472.00
	5050 Kingsley Dr Md 1moc2g Cincinnati, OH 45263	When was the debt incurred?	Opened 4/01/08 Last Active 2/28/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.3	Fifth Third Bank Nonpriority Creditor's Name	Last 4 digits of account number	9450	\$455.00
	5050 Kingsley Dr Md 1moc2g Cincinnati, OH 45263	When was the debt incurred?	Opened 5/01/08 Last Active 3/20/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Credit Card		
4.3	Fifth Third Bank Nonpriority Creditor's Name	Last 4 digits of account number	3682	\$0.00
	5050 Kingsley Dr Md 1moc2g Cincinnati, OH 45263	When was the debt incurred?	Opened 10/01/07 Last Active 1/21/09	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□ Yes	Other Specify Credit Card	I	

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Debto	Leigh Ann Bowers	——————————————————————————————————————	Case number (if know)	
4.3	Fifth Third Bank	Last 4 digits of account number	2974	\$0.00
	Nonpriority Creditor's Name 5050 Kingsley Dr Cincinnati, OH 45227	When was the debt incurred?	Opened 11/01/07 Last Active 6/29/10	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile	9	
4.3	Fitness Premier Bourbonnais Nonpriority Creditor's Name	Last 4 digits of account number	9007	\$329.98
	350 Main St NW Bourbonnais, IL 60914	When was the debt incurred?	5/6/2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	 ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 		
	■ No			
	Yes	Other. Specify gym membership fees		
4.3	Florida Power and Light Co.	Last 4 digits of account number	2046	\$234.96
4	Nonpriority Creditor's Name PO Box 025576	When was the debt incurred?	5/25/2012	V =0.1100
	Miami, FL 33102			
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		Debts to pension or profit-sharin	or plans, and other similar dobts	
	■ No		יש אומוים, מווע טנוופו אווווומו עפטנא	
	☐ Yes	Other Specify utility		

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Debtor 1 Leigh Ann Bowers 4.3 Four Leaf 1552 \$1,017.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 5/30/14 Last Active 600 W. 22nd Street When was the debt incurred? 1/29/15 Oak Brook, IL 60523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Automobile ☐ Yes Leigh A 4.3 Four Leaf Finance \$620.40 6 Last 4 digits of account number **Bowers** Nonpriority Creditor's Name 600 W 22nd St, Ste 103 When was the debt incurred? 10/29/2014 Oak Brook, IL 60523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify car payment ☐ Yes 4.3 0764 Glamour \$12.00 Last 4 digits of account number Nonpriority Creditor's Name PO box 37653 When was the debt incurred? 12/12/2012 **Boone, IA 50037** As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify magazine subsubscription fee ☐ Yes

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Debtor 1 Leigh Ann Bowers 4.3 **Highlights for Children / RMCB** 7621 \$22.87 Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 6381 When was the debt incurred? 4/15/2015 Harlan, IA 51593 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify merchandise purchase 4.3 **Highlights High Five** 2690 \$24.84 Last 4 digits of account number 9 Nonpriority Creditor's Name PO Box 6036 When was the debt incurred? 1/2014 Harlan, IA 51593-1536 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify magazine subscription ☐ Yes 4.4 Joliet Junior College 3804 \$1.505.00 0 Last 4 digits of account number Nonpriority Creditor's Name 1215 Houbolt Rd When was the debt incurred? 7/16/2014 Joliet, IL 60431 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify tuition

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Case number (if know)

4.4	Kohl's - Payment Center	Last 4 digits of account number	2280	\$452.82
1	Nonpriority Creditor's Name	_		Ψ-102.102
	PO Box 2983 Milwaukee, WI 53201-2983	When was the debt incurred?	10/2015	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify charge care	d	
4.4	Kohls/capone	Last 4 digits of account number	7963	\$592.00
	Nonpriority Creditor's Name			****
	N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051	When was the debt incurred?	Opened 9/01/07 Last Active 4/25/12	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Account		
4.4	Kohls/capone	Last 4 digits of account number	2280	\$422.00
<u> </u>	Nonpriority Creditor's Name			· · · · · · · · · · · · · · · · · · ·
	N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051	When was the debt incurred?	Opened 10/01/15 Last Active 12/17/15	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	■ Other Specify Charge Acc	count	
		- Outlot, opcomy		

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☐ Yes

■ Other. Specify Factoring Company Account Citibank N.A.

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Case number (if know) Debtor 1 Leigh Ann Bowers 4.4 \$816.00 Midland Funding 7866 Last 4 digits of account number Nonpriority Creditor's Name 2365 Northside Dr Ste 30 When was the debt incurred? Opened 9/01/13 San Diego, CA 92108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account Ge Capital** ☐ Yes Other. Specify Retail Bank 4.4 Millennium Laboratories 5063 \$316.94 Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 841773 1/10/2013 When was the debt incurred? Dallas, TX 75284-1773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes laboratory blood testing services Other. Specify **Northwest Collectors** \$1,438,00 Last 4 digits of account number Nonpriority Creditor's Name 3601 Algonquin Rd When was the debt incurred? Opened 1/01/14 Rolling Meadow, IL 60008 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Channahon Fire** ☐ Yes Other. Specify **Protection Dist**

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Debtor 1 Leigh Ann Bowers 4.5 Penn Credit / Brevard Cnty Clrk Ct 9568 \$499.50 Last 4 digits of account number 0 Nonpriority Creditor's Name 916 S 14th St When was the debt incurred? 2/13/2013 Harrisburg, PA 17108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify traffic offense Physicians Immediate Care -4.5 3343 \$7.80 Chicago Last 4 digits of account number Nonpriority Creditor's Name PO Box 8799 9/21/2014 to 12/1/2014 When was the debt incurred? Carol Stream, IL 60197-8799 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify medical 4.5 5019 \$446.25 **Pioneer** Last 4 digits of account number Nonpriority Creditor's Name 197 SW Waterford Ct When was the debt incurred? 6/2015 Lake City, FL 32025 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify collection for brevard county clerk of court

☐ Yes

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Debtor 1 Leigh Ann Bowers Case number (if know) 4.5 **PNC Bank** 0118 \$3,245.45 Last 4 digits of account number 3 Nonpriority Creditor's Name 1 PNC Plaza When was the debt incurred? 4/24/2012 249 5th Ave Pittsburgh, PA 15222 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify bank overdraft 4.5 PPS / Kohls 1870 \$547.82 Last 4 digits of account number Nonpriority Creditor's Name 272 N 12 St 10/26/2012 When was the debt incurred? Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts credit / charge card ☐ Yes Other. Specify Collection for Kohls Preferred CMS / Holmes Reg Med 4.5 \$687.00 1126 5 Last 4 digits of account number Nonpriority Creditor's Name PO Box 2964 When was the debt incurred? 6/2011 Tampa, FL 33601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify medical

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Leigh Ann Bowers Case number (if know)

DCDIO	Leigh Aim bowers		Case Harriber (II know)					
4.5 6	Primary Care Professionals	Last 4 digits of account number	5199	\$262.31				
	Nonpriority Creditor's Name 1890 Silver Cross Blvd	When was the debt incurred?	8/27/2015 - 9/10/2015					
	New Lenox, IL 60451	_						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply					
	_							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed	LI Disputed Type of NONPRIORITY unsecured claim:					
	At least one of the debtors and another	Student loans	u Claim.					
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims	a plane, and other cimilar debte					
	■ No □ Yes	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify medical						
4.5	Sears Credit Cards (Mastercard)	Last 4 digits of account number	2563	\$2,658.00				
	Nonpriority Creditor's Name PO Box 183082	When was the debt incurred?	5/17/2012					
	Columbus, OH 43218 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply					
	Who incurred the debt? Check one.	As of the date you me, the claim	S. Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only							
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans	☐ Student loans					
	debt		aration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims	a plane, and other circiles debte					
	■ No	☐ Debts to pension or profit-sharin	ig plans, and other similar debts					
	Yes	Other. Specify credit card	_					
4.5	Stellar Recovery Inc	Last 4 digits of account number	3434	\$227.00				
	Nonpriority Creditor's Name 1327 Highway 2 Wes	When was the debt incurred?	Opened 10/01/12					
	Kalispell, MT 59901	when was the dest mounted.	Opened 10/01/12					
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply					
	Who incurred the debt? Check one.							
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated	I Unliquidated					
	☐ Debtor 1 and Debtor 2 only							
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	No	Debts to pension or profit-sharin	o plans, and other similar debts					
	□ Yes		Attorney Comcast					
	□ 162	Other. Specify Collection	Autorney Conicast					

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Leigh Ann Bowers Case number (if know)

DCDI	Leigh Ann Bowers			
4.5 9	Syncb / Walmart	Last 4 digits of account number	2937	\$815.59
	Nonpriority Creditor's Name Po Box 965024 El Paso, TX 79998	When was the debt incurred?	Opened 5/09/10 Last Active 4/22/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Charge Acc		
4.6 0	Transworld Systems Inc / Nicor	Last 4 digits of account number	U170	\$80.41
	Nonpriority Creditor's Name PO Box 17205	When was the debt incurred?	3/2014	
	Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Collection Utility	for Nicor	
4.6 1	Unique Nat Collections /Wilm Pub	Last 4 digits of account number	7428	\$177.00
	Nonpriority Creditor's Name 201 S Kankakee St Wilmington, IL 60481	When was the debt incurred?	10/2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	0 0 1	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	Yes	■ Other. Specify library fees		

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Case number (if know) Debtor 1 Leigh Ann Bowers 4.6 **Unique Ntl C** 1900 \$177.00 Last 4 digits of account number 2 Nonpriority Creditor's Name 119 E. Maple Stree When was the debt incurred? Jeffersonville, IN 47130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify 04 Wilmington Public Library ☐ Yes 4.6 ViaSat Inc. / Wildblue / Exede 1002 \$21.28 Last 4 digits of account number Nonpriority Creditor's Name 6155 El Camino Real When was the debt incurred? 6/13/2013 Carlsbad, CA 92009 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify internet services ☐ Yes Vista Woodworking / GEICO / 4.6 8019 \$27,833.39 A.Dyott Last 4 digits of account number Nonpriority Creditor's Name 7/10/2013 1 Geico Blvd When was the debt incurred? Fredericksburg, VA 22412 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Property and personal injury damages arising from automobile accident. ☐ Yes Other. Specify File # 201301276032

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Debt	or 1 Leigh Ann Bowers		Case number (if know)	
4.6 5	Webbank/fingerhut	Last 4 digits of account number	4855	\$0.00
	Nonpriority Creditor's Name 6250 Ridgewood Roa Saint Cloud, MN 56303	When was the debt incurred?	Opened 12/12/10 Last Active 1/07/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Charge Acc	count	
4.6 6	Wuesthoff Medical Center Rockledge	Last 4 digits of account number	0354	\$1,091.93
	Nonpriority Creditor's Name PO Box 741273 Atlanta, GA 30374	When was the debt incurred?	4/9/2012	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify medical		
1.6	Yatin Shah MD SC	Last 4 digits of account number	4866	\$25.61
	Nonpriority Creditor's Name 2025 S Chicago St	When was the debt incurred?	8/12/2015 - 9/25/2015	
	Joliet, IL 60436 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify medical		

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Case number (if know) Document Debtor 1 Leigh Ann Bowers Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Alliance One** Line 4.27 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 4850 Street Rd, Suite 300 ■ Part 2: Creditors with Nonpriority Unsecured Claims Feasterville Trevose, PA 19053 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Blatt, Hasenmiller, Leibsker & Moore Line 4.46 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 10 South LaSalle St, Suite 2200 ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60603 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Blatt, Hasenmiller, Leibsker & Moore Line 4.47 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 10 South LaSalle St, Suite 2200 ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60603 Last 4 digits of account number **Leigh Bowers** Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Creditors Discount & Audit Co Line 4.67 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 415 E Main St ■ Part 2: Creditors with Nonpriority Unsecured Claims Streator, IL 61364 Last 4 digits of account number 4308 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Illinois Dept of Transportation /TS Line 4.64 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1340 N 9th Part 2: Creditors with Nonpriority Unsecured Claims Springfield, IL 62766-0002 Last 4 digits of account number 6032 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Mandarich Law Group, LLP Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1 N Dearborn St, Ste 650 ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60602 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Northland Group** Line **4.27** of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 390905 Part 2: Creditors with Nonpriority Unsecured Claims Minneapolis, MN 55439 Last 4 digits of account number 0194 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? P. Scott Lowery PC Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 4198 Part 2: Creditors with Nonpriority Unsecured Claims Englewood, CO 80155 Last 4 digits of account number 2752 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Vista Woodworking Line 4.64 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2200 Susanna Way

Crest Hill, IL 60403 Name and Address Vista Woodworking /American Access 23215 W Mound St Joliet, IL 60436

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 6032

On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.64 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number Leigh A. Bowers

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 9030

Name and Address

PO Box 923747

Vital Recovery Services, LLC

Norcross, GA 30010-3747

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Debtor 1 Leigh Ann Bowers

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	11,360.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	\$ \$	80,059.15
		here.		Φ	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	91,419.15

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		DOCUME	ni Paue 45 01 75	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Leigh Ann Bowe	rs		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				Chack if this is an
(ii kilowii)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the c	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3	<u> </u>		<u> </u>		
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	0.1.5		0.0.0	2.1. 0000	
2.4	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	- ity		Cidio		

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		Docume	ent Page 46 d	NT /5	
Fill in this i	information to identify your				
Debtor 1	Leigh Ann Bowe	rs			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
0	, ,			_	
Case numb (if known)					☐ Check if this is an
					amended filing
Official	Form 106H				
	ule H: Your Cod	ebtors			12/15
	<u> </u>				.2,10
ill it out, an our name	nd number the entries in the and case number (if known	boxes on the left. Attach). Answer every question	the Additional Page t	o this page. On the to	needed, copy the Additional Page, p of any Additional Pages, write
1. Do y	ou have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No □ Yes					
Arizona 	nin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3.				ty states and territories include
`	. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form 1	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed the	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor lame, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	ne
	Name			☐ Schedule E/F,	
				☐ Schedule G, lin	ne
	Number Street			<u> </u>	
C	City	State	ZIP Code		
3.2				☐ Schedule D, lin	
	Name			Schedule E/F,	
				☐ Schedule G, lin	
N	Number Street			_	
C	City	State	ZIP Code		

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Fill	in this information t	to identify your ca	ase:							
Deb	otor 1	Leigh Ann B	owers			_				
	otor 2 buse, if filing)					_				
Uni	ted States Bankrup	otcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		_				
	se number									chapter
O	fficial Form	106I					MM / DD/ \		mig dato.	
So	chedule I:	Your Inco	ome				WIWI / DD/			12/15
sup spo atta	plying correct infouse. If you are sep ch a separate she	ormation. If you parated and you	ible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your s th you, do not inclu	spouse i de inforr	s living w	vith you, incl	ude informati ouse. If more	ion about space is i	your needed,
1.	Fill in your emplinformation.	oyment		Debtor 1			Debtor 2	2 or non-filing	g spouse	
	If you have more		Employment status	■ Employed			☐ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not e	mployed			
	employers.		Occupation	Mental Health To	ech 1					
	Include part-time, self-employed wo		Employer's name	Shapiro Develop	omenta	l Center				
	Occupation may or homemaker, if		Employer's address	100 E Jeffery St Kankakee, IL 60						
			How long employed th	nere? 1 year, 2015	since M	larch 22				
Par	Give De	tails About Mon	thly Income							
	mate monthly incouse unless you are		ate you file this form. If y	you have nothing to re	eport for a	any line, v	write \$0 in the	space. Includ	e your nor	n-filing
	u or your non-filing e space, attach a s		ore than one employer, co	embine the information	n for all e	mployers	for that perso	on on the lines	below. If y	ou need
						For	Debtor 1	For Debtor		
2.			ry, and commissions (be calculate what the monthly		2.	\$	3,408.16	\$	N/A	
3.	Estimate and lis	t monthly overti	me pay.		3.	+\$	355.44	+\$	N/A	
4.	Calculate gross	Income. Add lin	e 2 + line 3.		4.	\$;	3,763.60	\$	N/A	

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Deb	tor 1	Leigh Ann Bowers	-	C	ase nu	ımber (<i>if k</i>	nown) -				
					For D	ebtor 1				Debtor		
	Cor	by line 4 here	4.		\$	3,76	3 60		non-	-filing s	spouse N/A	
	OOL	by line 4 nere	٦.		Ψ	3,70	3.00	_	Ψ		11/	<u>`</u>
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	86	1.44	ļ	\$		N/A	\
	5b.	Mandatory contributions for retirement plans	5b		\$	15	0.54	ŀ	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c		\$		0.00	_	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d		\$		0.00	_	\$		N/A	
	5e. 5f.	Insurance Domestic support obligations	5e 5f.		\$		0.06 0.00	_	\$		N/A	
	5g.	Union dues	5g		\$—		5.28	_	\$ 		N/A	_
	5h.	Other deductions. Specify: Assoc. Dues	5h		\$		8.40		- '		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	 6.	:	\$	1,20	5 72	_)	\$		N/A	<u> </u>
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		* \$	2,55			\$		N/A	
8.			•			2,00		_	–		14/	<u> </u>
Ο.	8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0.5		c			_	œ.			
	Oh	monthly net income.	8a 8b		\$		0.00	_	\$		N/A	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent		٠.	\$		0.00	_	Φ		N/A	<u>\</u>
	ос.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$		0.00	_	\$		N/A	
	8d.	Unemployment compensation	8d		\$		0.00		\$		N/A	_
	8e.	Social Security	8e	٠.	\$		0.00)	\$		N/A	<u>\</u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$		0.00		\$		N/A	
	8g.	Pension or retirement income	8g		\$		0.00		\$		N/A	
	8h.	Other monthly income. Specify:	8h	1.+	\$		0.00	_ +	\$		N/A	<u>\</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$			0.00)	\$		N/	Ά.
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2	557.88]_[;	\$		N/A	= \$	2,557.88
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ť-		001.00		_		14/7	* -	2,007.00
11.	Stat Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not exify:	depe								e <i>J</i> . +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certain lies								12.	\$	2,557.88
											Comb	ined ily income
13.	Do	you expect an increase or decrease within the year after you file this form	?									ny moonie
		No.										
		Vec Evolain:										

Official Form 106I Schedule I: Your Income page 2

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		(1		
		ition to identify yo						
Deb	tor 1	Leigh Ann B	owers			Che □	eck if this is: An amended filing	
	tor 2						A supplement show	wing postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bankr	ruptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
So	chedule	J: Your	Exper	ises				12/1
info	ormation. If m		eded, atta	. If two married people ar ich another sheet to this n.				
Par 1.	t 1: Descr	ribe Your House	ehold					
	■ No. Go to	line 2.	in a separ	ate household?				
	□и	0	·	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Del	btor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Son		6	■ Yes
								□ No □ Yes
							_	□ No
								☐ Yes
								□ No □ Yes
3.	expenses o	penses include f people other t d your depende	han _—	No Yes				Li Tes
exp	imate your ex	nate Your Ongoi expenses as of y a date after the	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this followed the second	orm as a s e J, check t	upplement in a Cha he box at the top o	apter 13 case to report of the form and fill in the
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses
4.		or home owners and any rent for th		nses for your residence. I or lot.	nclude first mortgag	e 4.	\$	546.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
	4b. Prope	rty, homeowner's				4b.	·	0.00
				upkeep expenses		4c.	:	0.00
5.		owner's associa		dominium dues our residence, such as ho	me equity loans	4d. 5.		0.00 0.00

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Debtor 1	Leigh Ann Bowers	Case num	nber (if known)	
i. Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	200.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	65.00
6d.		6d.	\$	0.00
	od and housekeeping supplies	— 7.	· ·	550.00
	Idcare and children's education costs	8.		15.00
	thing, laundry, and dry cleaning	9.	·	95.00
	sonal care products and services	10.	· ·	60.00
	dical and dental expenses	11.		30.00
	nsportation. Include gas, maintenance, bus or train fare.		Ψ	30.00
	not include car payments.	12.	\$	350.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	75.00
	aritable contributions and religious donations	14.	· -	0.00
	urance.		<u> </u>	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	. Life insurance	15a.	\$	0.00
15b	. Health insurance	15b.	\$	0.00
15c	. Vehicle insurance	15c.		100.00
	l. Other insurance. Specify:	15d.		0.00
	res. Do not include taxes deducted from your pay or included in lines 4 or 20.			0.00
	ecify:	16.	\$	0.00
	tallment or lease payments:		·	0.00
	. Car payments for Vehicle 1	17a.	\$	547.00
	Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify:	17c.		0.00
	l. Other. Specify:	17d. 17d.	·	0.00
	ur payments of alimony, maintenance, and support that you did not report as		Ψ	0.00
	lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.	· —	
	ner real property expenses not included in lines 4 or 5 of this form or on Sche	edule I: Yo	our Income.	
20a	. Mortgages on other property	20a.		0.00
	. Real estate taxes	20b.	\$	0.00
20c	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	l. Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.		0.00
	er: Specify: Pet food for cat.		+\$	50.00
			+\$	
	amins, light bulbs, and such miscellaneous.			55.00
Bir	thday/Christmas presents.		+\$	12.00
Cal	culate your monthly expenses			
	. Add lines 4 through 21.		\$	2,750.00
	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	Add line 22a and 22b. The result is your monthly expenses.		\$	2,750.00
220	. Add the 22a and 22b. The result is your monthly expenses.		Ψ	2,730.00
Cal	culate your monthly net income.			
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,557.88
	Copy your monthly expenses from line 22c above.	23b.	-\$	2,750.00
	• •			
23c	Subtract your monthly expenses from your monthly income.	220	· ·	-192.12
	The result is your monthly net income.	23c.	\$	-132.12
Do	you expect an increase or decrease in your expenses within the year after yo	ou filo this	s form?	
	example, do you expect to finish paying for your car loan within the year or do you expect you			ease or decrease because of a
	lification to the terms of your mortgage?	ortgage	paymont to more	sace of decrease because of a
Ц,	Yes. Explain here:			

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Fill in this infor	rmation to identify your	case:			
Debtor 1	Leigh Ann Bowe	r'S			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official For	-	an Individua	l Debtor's S	Schedules	12/15
	18 U.S.C. §§ 152, 1341, 1	519, and 3571.			
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill o	ut bankruptcy forms?	
-	Name of a constant			August David	munitari Batilian Buan anada Matia
_	Name of person	that I have read the sun	nmary and schedules		cruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	re true and correct.	and there read the sun	mary and somedies	with this decidiatio	4.14
X /s/ Lei	igh Ann Bowers		X		
Leigh	Ann Bowers ure of Debtor 1		Signature	e of Debtor 2	

Date

Date May 3, 2016

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Fill in this informat	ion to identify your	. case.			
_	Leigh Ann Bowe First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle None	Loot Nama		
(-)		Middle Name	Last Name		
United States Bankr	uptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Case number					
(if known)				_	heck if this is an mended filing
Be as complete and	f Financial		are filing together, both are	Bankruptcy equally responsible for sup y additional pages, write you	
number (if known).		•	uns form. On the top of an	y additional pages, write you	ii iiaiiie aiiu case
Part 1: Give Deta	ails About Your Ma	rital Status and Where You	Lived Before		
1. What is your co	urrent marital statu	e?			
_	arront maritar stata	.			
☐ Married ■ Not marrie	٠				
■ Not mame	u				
2. During the last	3 years, have you	lived anywhere other than	where you live now?		
■ No					
☐ Yes. List a	I of the places you li	ved in the last 3 years. Do no	ot include where you live nov	٧.	
Debtor 1 Prior	Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there
				nity property state or territory ico, Texas, Washington and W	
_	morado / mzoria, Gai	mornia, raario, Louisiaria, rro	vada, rrow moxico, r dono re	noo, roxao, rraomington and rr	10001101111,
■ No □ Yes. Make	sure you fill out Sch	nedule H: Your Codebtors (Of	fficial Form 106H).		
Part 2 Explain t	he Sources of You	r Incomo			
4. Did you have a	ny income from en		all businesses, including part		ndar years?
Yes. Fill in	the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of the date you filed f	-	☐ Wages, commissions, bonuses, tips	\$14,621.51	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
For last calendar y (January 1 to Dece		☐ Wages, commissions, bonuses, tips	\$34,960.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
Official Form 107		Statement of Financial Aff	airs for Individuals Filing for B	Bankruptcv	page '

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Case number (if known) Document Debtor 1 Leigh Ann Bowers

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For the calendar year before th (January 1 to December 31, 20)		\$18,011.00	☐ Wages, commissi bonuses, tips	ions,
	☐ Operating a business		Operating a busing	ness
Include income regardless of and other public benefit payr winnings. If you are filing a jo	Income during this year or the two f whether that income is taxable. Ex- ments; pensions; rental income; inte- point case and you have income that as income from each source separa	camples of other income are a erest; dividends; money collect you received together, list it of	ted from lawsuits; royal only once under Debtor	ties; and gambling and lottery
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year the date you filed for bankrupto		\$2,296.00		
For last calendar year: (January 1 to December 31, 20	2014 federal and state tax refund.	\$6,373.00		
For the calendar year before th (January 1 to December 31, 20)		\$5,000.00		
Part 3: List Certain Payment	s You Made Before You Filed for	Bankruptcv		
-	btor 2's debts primarily consume			
□ No. Neither Debtor 1	I nor Debtor 2 has primarily cons ly for a personal, family, or househo	sumer debts. Consumer debt	s are defined in 11 U.S.	C. § 101(8) as "incurred by an
During the 90 day	ys before you filed for bankruptcy, d	did you pay any creditor a tota	I of \$6,425* or more?	
	o line 7.			
paid not ir	pelow each creditor to whom you pa that creditor. Do not include payme include payments to an attorney for	ents for domestic support obliques this bankruptcy case.	ations, such as child su	upport and alimony. Also, do
	stment on 4/01/19 and every 3 yea		or after the date of adju	ustment.
	tor 2 or both have primarily cons ys before you filed for bankruptcy, d		I of \$600 or more?	
□ No. Go to	o line 7.			
inclu	pelow each creditor to whom you pa de payments for domestic support on the period of this bankruptcy case.			
Creditor's Name and Addr	Pess Dates of payment	ent Total amount	Amount you Wa	s this payment for

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Case number (if known) Debtor 1 Leigh Ann Bowers

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount yo still ov		payment for
	Chrysler Capital PO Box 961275 Fort Worth, TX 76161	Monthly car payment of \$547/month in Feb, March, and April 2016, for a total of \$1641.	\$1,641.00	\$22,645.0	■ Car □ Credit C □ Loan Re	card epayment rs or vendors
7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any ger a control, or owner of 20% o	neral partners; partners or more of their voting	erships of whic g securities; ar	th you are a gener nd any managing	ral partner; corporations agent, including one for
	No					
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount yo still ov		r this payment
8.	Within 1 year before you filed for bankrupt	cy, did you make any pay	ments or transfer a	any property o	on account of a	debt that benefited an
	insider?					
	Include payments on debts guaranteed or cos	signed by an insider.				
	No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount	Amount yo	ou Reason fo	r this payment
			paid	still ov		ditor's name
Por	t 4: Identify Logal Actions Penascossis	no and Faradaguras				
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreciosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	■ No					
	Yes. Fill in the details.					
		Nature of the same	C		Ctatus of t	h
	Case title Case number	Nature of the case	Court or agency		Status of t	ne case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below		erty repossessed, f	oreclosed, ga	arnished, attache	ed, seized, or levied?
	□ No. Go to line 11.					
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		_	ate	Value of the
	Creditor Name and Address	. ,			vale	property
	Blatt Hasenmiller for Midland	Explain what happened		m 1	2/14/2015	¢4 906 00
	Funding 10 S LaSalle St, Ste 2200 Chicago, IL 60603	Wages garnished fro 12/14/2015 paychecl paycheck. Total garn is approximately \$18	k through 4/29/20 nished over this	16 tl	2/14/2015 hough //29/2016	\$1,896.00
		☐ Property was reposse				
		Property was foreclos				
		Property was garnish				
		☐ Property was attache	d, seized or levied.			

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Part 6: List Certain Losses

- 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?
 - No

Yes. Fill in the details.

Describe the property you lost and how the loss occurred

Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of *Schedule A/B: Property.*

Date of your loss

Value of property lost

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy

- ☐ No
- Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Description and value of any property transferred

Date payment or transfer was made

Amount of payment

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Debtor 1 Leigh Ann Bowers

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any proper transferred	ty Date payment or transfer was made	Amount of payment
Chandraiah Law Firm 1 Dearborn Sq, Suite LL3 Kankakee, IL 60901 sam@chicagobankruptcyhelp.com Within 1 year before you filed for bankruptcy, die promised to help you deal with your creditors or Do not include any payment or transfer that you listed	to make payments to your creditors?	dit attorney fee, \$335 court filing fee, and \$35 credit report fee paid on April 9th, 2016, and additional \$500 toward attorney fee paid on April 19th, 2016. So total of \$1310 paid thus far. Balance of \$59 remaining on attorney fee.	\$1,310.00
NoYes. Fill in the details.			
Person Who Was Paid Address	Description and value of any proper transferred	ty Date payment or transfer was made	Amount of payment
Within 2 years before you filed for bankruptcy, d transferred in the ordinary course of your busine include both outright transfers and transfers made a include gifts and transfers that you have already listed. No Yes. Fill in the details.	ess or financial affairs? as security (such as the granting of a sec		
Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Within 10 years before you filed for bankruptcy,		f-settled trust or similar devic	e of which you are a
beneficiary? (These are often called asset-protection No	on devices.)		

17.

18.

19.

Description and value of the property transferred

Yes. Fill in the details.

Name of trust

Date Transfer was

made

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Debtor 1 **Leigh Ann Bowers**

	tt 8: List of Certain Financial Accounts, Ins	•		_	an vous bonoffs along t
20.	Within 1 year before you filed for bankruptc sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, associated No	or other financial accou	nts; certificates o	of deposit; shares in banks, cr	
	Yes. Fill in the details.				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	t or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yearsh, or other valuables?	year before you filed for	bankruptcy, any	safe deposit box or other dep	pository for securities,
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit of	or place other than you	home within 1 y	ear before you filed for bankru	uptcy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or l to it? Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?
Pai	rt 9: Identify Property You Hold or Control	for Someone Else			
23.	Do you hold or control any property that so for someone.	meone else owns? Incl	ude any property	you borrowed from, are stori	ng for, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the property	Value
Pai	rt 10: Give Details About Environmental Info	ormation			
For	the purpose of Part 10, the following definition	ons apply:			
	Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of these	ne air, land, soil, surfac	e water, groundw		
	Site means any location, facility, or property to own, operate, or utilize it, including dispose	•	environmental la	w, whether you now own, ope	rate, or utilize it or used
	Hazardous material means anything an envi hazardous material, pollutant, contaminant,		as a hazardous w	vaste, hazardous substance, t	oxic substance,
Rep	ort all notices, releases, and proceedings that	at you know about, rega	ardless of when t	hey occurred.	
24.	Has any governmental unit notified you that	you may be liable or p	otentially liable u	nder or in violation of an envi	ronmental law?
	■ No □ Yes. Fill in the details.				
	Name of site	Governmental un	it	Environmental law, if you	Date of notice

Address (Number, Street, City, State and

ZIP Code)

know it

Address (Number, Street, City, State and ZIP Code)

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> _. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

■ No

Official Form 107

☐ Yes. Name of Person

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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Case number (if known) Document

Debtor 1 Leigh Ann Bowers

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Ellin dia latama				
Fill in this inform	nation to identify yo	our case:		
Debtor 1	Leigh Ann Boy	Vers Middle Name	Last Name	
Debtor 2	ot rtaine	illiadio i tallio	<u> </u>	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the	e: NORTHERN DIST	FRICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official For	m 108			
Statemen	t of Intent	ion for Indiv	riduals Filing Under Cl	napter 7 12/15
			<u> </u>	12.0
If you are an indiv	vidual filing under o	hapter 7, you must fil	l out this form if:	
creditors have	claims secured by	your property, or		
		ty and the lease has no		- dete
			you file your bankruptcy petition or by th e time for cause. You must also send cop	
on the fe	orm			•
		her in a joint case, bo	th are equally responsible for supplying o	correct information. Both debtors must
sign and	d date the form.			
			needed, attach a separate sheet to this f	orm. On the top of any additional pages,
write yo	ur name and case	number (if known).		
Part 1: List Yo	ur Creditors Who H	lave Secured Claims		
1. For any credito	rs that you listed in	n Part 1 of Schedule D	: Creditors Who Have Claims Secured by	Property (Official Form 106D), fill in the
information bel	•		•	
identity the cre	uitor and the proper	ty that is conateral	What do you intend to do with the prop secures a debt?	Derty that Did you claim the property as exempt on Schedule C?
Creditor's Ch	nrysler Capital		☐ Surrender the property.	■ No
name:	, 5		Retain the property and redeem it.	■ No
Description of	2045 Jaan Batri	at 45 500 miles	☐ Retain the property and enter into a	☐ Yes
property	2015 Jeep Patri White, FWD, in	ot 15,500 miles verv good	Reaffirmation Agreement.	
securing debt:	condition. White	e color.	Retain the property and [explain]:	
orraming accum	Location: 339 N	· -		
	7, Wilmington II Kelly Blue Book			
	value in very go		Datain 9 may	
	\$14,258.		Retain & pay.	
Part 2: List Yo	ur Unexpired Perso	onal Property Leases		
For any unexpired	d personal property	lease that you listed		Unexpired Leases (Official Form 106G), fill
			expired leases are leases that are still in the trustee does not assume it. 11 U.S.C.	effect; the lease period has not yet ended. § 365(p)(2).
				- ",,,
Describe your ur	nexpired personal p	property leases		Will the lease be assumed?
Lessor's name:				□ No
Description of leas	sed			
Property:				☐ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Leigh Ann Bowers	Case number (if known)
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about	any property of my estate that secures a debt and any personal
property that is subject to an unexpired lease.	
X /s/ Leigh Ann Bowers X	
Leigh Ann Bowers Signature of Debtor 1	Signature of Debtor 2
Date May 3, 2016 Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	_
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-15066 Doc 1 Filed 05/03/16 Entered 05/03/16 09:03:44 Desc Main Document Page 66 of 75

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Leigh Ann Bowers		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR DE	BTOR(S)	
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing the rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	999.00	
	Prior to the filing of this statement I have received		\$	940.00	
	Balance Due		\$	59.00	
2. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	\blacksquare Debtor \square Other (specify):				
4.	I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are memb	pers and associates of my law firm	n.
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name				
5.	In return for the above-disclosed fee, I have agreed to re	nder legal service for all aspect	ts of the bankruptcy c	ase, including:	
l	Analysis of the debtor's financial situation, and rende Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credito [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hother.	ement of affairs and plan which ors and confirmation hearing, an educe to market value; exe ns as needed; preparation	n may be required; and any adjourned hear emption planning;	rings thereof;	
6. 1	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.	e does not include the following chargeability actions, judi	g service: cial lien avoidance	es, relief from stay actions o	r
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	y agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in	
M	ay 3, 2016	/s/ Subramaniam	Chandraiah		
D	ate	Subramaniam Ch Signature of Attorne			
		Chicago Bankrup	otcy Help / Chandr	aiah Law Firm	
		512 W Burlingtor La Grange, IL 609			
		3128963009 Fax			
			cyhelp@gmail.cor	<u>n</u>	
		Name of law firm			

United States Bankruptcy Court Northern District of Illinois

In re	Leigh Ann Bowers	Debtor(s)	Case No. Chapter 7	
	VEI	RIFICATION OF CREDITOR MA	ATRIX	
		Number of C	Creditors:	79
	The above-named Debtor(s) I (our) knowledge.	hereby verifies that the list of credito	ors is true and correct to the	he best of my
Date:	May 3, 2016			

Adams Family Dentistry 5600 W 87th St Burbank, IL 60459

Advanced Collection Bu Po Box 560063 Rockledge, FL 32956

Alliance One 4850 Street Rd, Suite 300 Feasterville Trevose, PA 19053

Ally Financial 200 Renaissance Ctr Detroit, MI 48243

Arnold Scott Harris /Cir Ct Kankake 111 W Jackson Blvd, Ste 600 Chicago, IL 60604

Badcock & More 2051 N Harbor City B Melbourne, FL 32935

Bay Area Credit Service / AT&T Mbty PO Box 467600 Atlanta, GA 31146

Bevard Health Alliance PO box 1137 Melbourne, FL 32902

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Channahon Fire Protection District PO box 457 Wheeling, IL 60090

Chrysler Capital PO Box 961275 Fort Worth, TX 76161-1275

City of Titusville PO Box 2807 Titusville, FL 32781-2807

Clinical Assoc in Medicine LLC 330 N Madison St, Ste 202 Joliet, IL 60435

Cmre / Brevard Emergency Services 3075 E Imperial Hwy Ste Brea, CA 92821

Comcast PO Box 3002 Southeastern, PA 19398-3002

Comed PO Box 6111 Wilmington, IL 60481-1182

Convergent Outsourcing 800 Sw 39th Street Renton, WA 98057 Creditors Discount & Audit Co 415 E Main St Streator, IL 61364

Dept Of Education/neln 3015 Parker Rd Aurora, CO 80014

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Direct Auto Insurance Co PO Box 969 Westbrook, CT 06498

Diversified Adjustment / Sprint PO Box 32145 Minneapolis, MN 55432-0145

Dsnb Macys Po Box 8218 Mason, OH 45040

Enhanced Recovery Co L Po Box 57547 Jacksonville, FL 32241 Fifth Third Bank 5050 Kingsley Dr Md 1moc2g Cincinnati, OH 45263

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Fifth Third Bank 5050 Kingsley Dr Md 1moc2g Cincinnati, OH 45263

Fifth Third Bank 5050 Kingsley Dr Cincinnati, OH 45227

Fitness Premier Bourbonnais 350 Main St NW Bourbonnais, IL 60914

Florida Power and Light Co. PO Box 025576 Miami, FL 33102

Four Leaf 600 W. 22nd Street Oak Brook, IL 60523

Four Leaf Finance 600 W 22nd St, Ste 103 Oak Brook, IL 60523

Glamour PO box 37653 Boone, IA 50037

Highlights for Children / RMCB PO Box 6381 Harlan, IA 51593

Highlights High Five PO Box 6036 Harlan, IA 51593-1536

Illinois Dept of Transportation /TS 1340 N 9th Springfield, IL 62766-0002

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Penn Credit / Brevard Cnty Clrk Ct 916 S 14th St Harrisburg, PA 17108

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PNC Bank 1 PNC Plaza 249 5th Ave Pittsburgh, PA 15222

PPS / Kohls 272 N 12 St Milwaukee, WI 53201

Preferred CMS / Holmes Reg Med Ctr PO Box 2964 Tampa, FL 33601

Primary Care Professionals 1890 Silver Cross Blvd New Lenox, IL 60451

Sears Credit Cards (Mastercard) PO Box 183082 Columbus, OH 43218 Stellar Recovery Inc 1327 Highway 2 Wes Kalispell, MT 59901

Syncb / Walmart Po Box 965024 El Paso, TX 79998

Transworld Systems Inc / Nicor PO Box 17205 Wilmington, DE 19850

Unique Nat Collections /Wilm Pub Lb 201 S Kankakee St Wilmington, IL 60481

Unique Ntl C 119 E. Maple Stree Jeffersonville, IN 47130

ViaSat Inc. / Wildblue / Exede 6155 El Camino Real Carlsbad, CA 92009

Vista Woodworking 2200 Susanna Way Crest Hill, IL 60403

Vista Woodworking / GEICO / A.Dyott 1 Geico Blvd Fredericksburg, VA 22412

Vista Woodworking /American Access 23215 W Mound St Joliet, IL 60436

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